



# Alabama Department of Public Health (ADPH) Functional and Access Needs Plan

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## ADPH FUNCTIONAL AND ACCESS NEEDS ANNEX

### OVERVIEW

At-risk individuals are people with functional and access needs that may interfere with their ability to obtain or receive medical care before, during, or after a disaster or emergency. Regardless of specific diagnosis, status, or label, the term “functional and access needs” is a broad set of **common and cross-cutting function and access-based needs**.

- Function-based needs refer to restrictions or limitations an individual may have that requires assistance before, during, and/or after a disaster or public health emergency.
- Access-based needs require that resources are accessible to all individuals, such as social services, accommodations, information, transportation, and medications to maintain health.

### VULNERABLE POPULATIONS

The term functional and access needs is used interchangeably with the following descriptions: vulnerable populations, disabled people, special needs groups, and underserved communities.

*Any individual, group, or community whose circumstances create barriers to obtaining or understanding information, or the ability to react as the general population. Circumstances that may create barriers include, but are not limited to, age; physical, mental, emotional, or cognitive status; culture; ethnicity; religion; language; citizenship; geography; or socioeconomic status.*

Functional and access needs is used to identify the following groups of individuals through the use of People First Language (an ADPH contracted service):

- Individuals who are deaf or hard of hearing
- People who are blind or have low vision
- Consumers who are diagnosed with mental and behavioral health illnesses
- Pregnant women and children
- Older adults
- Consumers with limited mobility and movement
- Individuals with developmental and cognitive issues
- People with chronic health conditions
- People who are limited English proficient or English is not their primary language
- People with very low income
- People without access to transportation
- People experiencing homelessness
- Other

Psychological barriers often prevent individuals with functional and access needs from seeking help during emergencies. This hesitation to seek assistance comes from many factors including:

- Fear of institutionalization
- Loss of routine and familiar environment
- Concerns that others need help more

Sociological barriers also prevent individuals with functional and access needs from seeking help during emergencies. These social barriers need to be addressed when providing services and resources during emergencies. Some of the social barriers include:

- Cultural and language barriers
- Lack of personal resources to self-evacuate
- Few family and friends support network
- Unreliable communication
- Poor physical and/or cognitive abilities to respond quickly
- Pets, livestock and service animals

During emergency operations, assistance can be requested from the Center for Emergency Preparedness (CEP) and/or CEP Social Workers to access resource and service assistance for functional and access needs groups during and after disasters. The following resources have been identified for accessibility during all hazards disasters:

- Statewide Functional and Access Needs Task Force
- Alabama Department of Senior Services
- Independent Living Centers of Alabama (*Birmingham, Montgomery and Mobile*)
- Governor's Office On Disabilities
- Alabama Department of Human Resources
- Alabama Department of Rehabilitation Services
- Alabama Department of Mental Health
- Alabama Institute for the Deaf and Blind
- 2-1-1 Connect

## **ADPH PREPAREDNESS STRATEGIES**

### **PUBLIC INFORMATION**

During all emergencies, the department will work to ensure that public information activities are accessible for those with functional and access needs. This includes ensuring that effective communication be made available by the department during an emergency event including the use of picture boards, and alternative formats like Braille and large print materials. Decisions on which type of auxiliary aid and services to use will be made on a case-by-case basis. The department has access to certified American Sign Language (ASL) interpreters, and foreign language translators.

### **COMMUNICATION**

*ADPH has put the following measures in place to ensure that it can communicate effectively during emergencies with people with functional and access needs within the state.*

## Telephone Interpretation Services

Each county health department has access to over-the-phone interpretation services. Staff can call and request interpretation for various languages to assist them in communicating with persons who do not speak English. Once a staff person places a call to the service, he or she can request the desired language, and communicate with the non-English speaking patient through an interactive voice response system.

## UbiDuo

The department now utilizes UbiDuo to communicate with the hearing impaired. This communication device helps those who are unable to write. Aside from people who are deaf or hard of hearing, or have a speech impediment, the UbiDuo can help a small minority of this population that has a condition that makes handwriting difficult.

The device is a portable, wireless, battery-powered, stand-alone communication device that facilitates simultaneous face-to-face communication by means of two displays and two keyboards.

Benefits of the UbiDuo include the following:

- Two to four people may simultaneously engage in a face-to-face chat.
- Rechargeable battery packs let persons chat for up to ten hours.
- "Instant-on" technology makes it ready for use within three seconds of power-on.
- The ground-breaking Ubi4Tel feature provides two-way, simultaneous communication over the telephone line when calling another UbiDuo. Up to two more people (one on each end) can be added to the telephone conversation using the UbiDuo's wireless capability, thus enabling a three-or four-way conference call.
- At six pounds, the UbiDuo is lightweight enough to carry anywhere.

The department currently has four UbiDuo devices in the central office, and has purchased eight more devices for the Alabama Department of Rehabilitation Services (DRS), a partner state agency, which has placed them in its area offices for use during emergency situations.

## P3 Optimized Purple Netbooks

To further assist with communicating with the people who are deaf or hard of hearing the department purchased several P3 Optimized Purple Netbooks for the DRS, which they placed in their central and area offices for use during emergency situations. They are communication devices specifically designed for the deaf community and allow face-to-face interaction with an interpreter. Purple's P3 software is a free software application that enables the Optimized Purple Netbook to blend quick and easy video relay service (VRS) and text relay service (TRS) access, with the power of an Internet-enabled, Windows® laptop. The P3 Optimized Purple Netbook also includes a built-in webcam, WiFi, and productivity software, all in a space the size of a hardback book.

## Picture/Language Boards

ADPH uses picture/language boards as a tool for communicating with people during emergencies. Whether the person does not have a clear command of English, is too ill or traumatized to speak clearly, or has a chronic speech problem, language boards can enable people to communicate through words and pictures. These boards include pictures to express nausea, dizziness, other common symptoms, as well as other types of important information. Although language boards are simple devices, they are very helpful to the department and can assist in communicating and receiving necessary information to both assess and treat a person's condition.

## Emergency Preparedness Documents and Videos

The department has created documents and videos for special population groups, particularly those who are hearing impaired and non-English speaking. Emergency preparedness documents are available in Braille, various languages, and on video. These materials have been distributed statewide both by the department and in partnership with other state agencies.

## **SHELTERING**

### Mass Care Shelter (MCS)

During an emergency event, most individuals with functional and access needs will be able to maintain their independence and be housed in a general population or MCS. However, conversation with the person(s) will help determine considerations needed on an individual basis. Some of these considerations include the availability of durable medical equipment (DME), consumable medical supplies (CMS), and personal assistance services (PAS). ADPH nurses and social workers may be requested to make rounds in a MCS to assess appropriate levels of care for functional and access needs patients.

MCS in Alabama are operated by the Alabama Department of Human Resources under ESF-6 in cooperation with American Red Cross and other partners.

### Medical Needs Shelter (MNS)

The mission of a MNS is to provide a shelter of last resort during emergency conditions for persons with conditions requiring medical/nursing oversight and who cannot be accommodated in a general population shelter. The MNS is housed in a secure facility with sustainable power, water, sanitation, and limited food service. Should a MCS and a MNS be located in the same facility, they will be operated as separate shelters.

Admission to a MNS is based on the person's medical needs and on the shelter's capacity to meet those needs. Individuals who have no acute medical conditions, but require medical

monitoring, treatment, or personal care beyond what is available in a general population, or MCS would need to be housed in a MNS with a caregiver.

This includes those who may have physical, sensory, mental health, developmental, intellectual and cognitive disabilities affecting their ability to function independently without assistance. Others who may need to be in a MNS include women in the late stages of pregnancy, older adults, and people whose body mass index (BMI) requires special equipment.

Someone planning to go to a MNS after evacuating will need to have the following things with them: one adult family member or caregiver; seven days of their prescription medications, medical supplies and medical equipment used at home; breathing devices, special foods and personal items.

## **SERVICE ANIMALS**

Under Alabama's laws on the rights of people with disabilities and the federal Americans with Disabilities Act (ADA), people with disabilities may bring their service animals to all public accommodations, into public buildings and spaces (such as parks and sidewalks), and onto public transportation and common carriers (buses, ferries, etc.).

Alabama law is not as detailed as the ADA. However, public accommodations in Alabama must comply with both sets of law, and protect your right to bring a service animal with you.

Under Alabama law, a service animal is any dog that is individually trained to perform tasks or do work for the benefit of a person with a disability. The tasks or work the dog does must be directly related to the person's disability. The ADA uses the same definition of service animals.

Under these definitions, service animals include:

- a guide dog (or "seeing eye" dog) who helps someone who is visually impaired navigate public transportation and city streets.
- a hearing dog who alerts someone who is hearing impaired to important sounds, like doorbells and alarms, or
- a seizure alert dog who warns someone with epilepsy of the onset of a seizure

Psychiatric service dogs are also included (Alabama expanded its service dog law beyond physical disabilities in 2011). These animals may assist those with mental disabilities by interrupting self-harming behavior, scanning spaces for intruders, responding to anxiety attacks with calming pressure, or providing medication reminders. Service dogs can do a variety of other tasks too, from alerting someone to potentially deadly allergens, to tracking an autistic child who has wandered away.

Neither the ADA nor Alabama's service animal law includes what some people call "emotional support" animals that provide a sense of safety, companionship, and comfort to those with psychiatric or emotional disabilities or conditions. Although these animals often have therapeutic benefits, they are not individually trained to perform specific tasks for their handlers. Under the ADA and Alabama law, owners of public accommodations are not required to allow emotional support animals, only service animals. These laws also do not apply to pets.

Under the ADA, a public accommodation may not ask you questions about your disability or demand to see certification or other proof of your animal's training or status. If it is not apparent

what your service animal does, the establishment may ask you only whether it is a service animal, and what tasks it performs for you.

Alabama law and the ADA both prohibit public accommodations from charging a special admission fee or requiring you to pay any other extra cost to have your service animal with you. However, you may have to pay for any damage your animal causes.

Under the ADA, your service animal can be excluded from a public accommodation if it poses a direct threat to the health and safety of others. For example, if your dog is aggressively barking and snapping at other individuals, the facility can ask that the dog be removed. Your animal may also be excluded if it is not housebroken, out of control, and you cannot or will not take measures to control them.

### Record of Changes

Date	Description of Changes	Page #	Revision made by (Signature)	Rationale